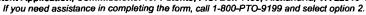
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UTILITY	Attorney Docket No.	CH
PATENT APPLICATION	First Inventor	U
TRANSMITTAL	Title	
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.	27
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO:	Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. Applicant claims small entity status. See 37 CFR 1.27. 3. Specification [Total Pages 8] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure	8. Nucleotide and/or A (if applicable, all ned a. Computer b. Specifical i. CD- ii. Pap c. Statemer	Readable Form (CRF) tion Sequence Listing on: ROM or CD-R (2 copies); or
4. Drawing(s) (35 U.S.C. 113) [Total Sheets 3] 5. Oath or Declaration [Total Sheets 2] a. Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. Application Data Sheet. See 37 CFR 1.76	10. 37 CFR 3.73((when there is length of the property) 11. English Trans Information D Statement (ID 13. Preliminary A 14. Return Receing (Should be synthesis) 15. Certified Copy (if foreign priches) 16. Nonpublication (b)(2)(B)(i). A or its equivaled Other:	(b) Statement Power of Attorney Station Document (if applicable) Copies of IDS Citations Provided Prov
18. If a CONTINUING APPLICATION, check appropriate box, and supspecification following the title, or in an Application Data Sheet under 3	7 CFR 1.76:	
		ior application No.:
Prior application information: Examiner For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the bis is considered a part of the disclosure of the accompanying continuation. The incorporation can only be relied upon when a portion has been inadvention.	n or divisional application an	ch an oath or declaration is supplied under Box d is hereby incorporated by reference.

OR Correspondence address below Name INVENTARIUM 4050 Rosemont blvd Address suite 1607 State QC City Zip Code Montreal H1X 1M4 Country Telephone 514 376 1273 Fax 514 376 8611 **CANADA** Name (Print/Type) Registration No. (Attorney/Agent) Signature Date

19. CORRESPONDENCE ADDRESS

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		Complete if Known						
$ eal_{f I}$ FEE TRANSMITTA	Application Number							
for EV 2004								
for FY 2004	First Named Inventor		nventor					
Effective 10/01/2003. Patent fees are subject to annual revision	Examiner Name		ne					
Applicant claims small entity status. See 37 CFR 1.27		Art Unit						
TOTAL AMOUNT OF PAYMENT (\$) 385.00		Attorney Docket No.						
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)						
Check Credit card Money Order None	3. ADDITIONAL FEES							
Deposit Account:	1 —	Large Entity Small Entity						
Deposit	Fee Cod	Fee e (\$)	Fee Fe Code (\$		Fee Description	Fee Paid		
Account Number	1051	130	2051	65 Surch	arge - late filing fee or oath			
Deposit Account	1052	50	2052		large - late provisional filing fee or			
Name	1053	130	1053 1		sheet English specification			
The Director is authorized to: (check all that apply) Charge fee(s) indicated below Credit any overpayments	5	2,520	1		ing a request for ex parte reexamination			
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804 9		esting publication of SIR prior to iner action			
Charge fee(s) indicated below, except for the filing fee	1805	1,840*	1805 1,8		esting publication of SIR after niner action			
to the above-identified deposit account.	1251	110	2251		nsion for reply within first month			
FEE CALCULATION	1252		1		nsion for reply within second month			
1. BASIC FILING FEE Large Entity Small Entity	1253	950	2253	475 Exter	nsion for reply within third month			
Fee Fee Fee Fee Description Fee Paid	1254	1,480			nsion for reply within fourth month			
Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee	1255	2,010	2255 1	,005 Exter	nsion for reply within fifth month			
1002 340 2002 170 Design filing fee 385.00	1401	330	2401	165 Notic	ce of Appeal			
1003 530 2003 265 Plant filing fee	1402	330	2402		g a brief in support of an appeal			
1004 770 2004 385 Reissue filing fee	1403	290	2403	145 Requ	est for oral hearing			
1005 160 2005 80 Provisional filing fee	1451	1,510	1451 1	,510 Petitio	on to institute a public use proceeding			
SUBTOTAL (1) (\$) 385.00	1452	110	2452	55 Petition	on to revive - unavoidable	L		
	1453	1,330	2453	665 Petiti	ion to revive - unintentional			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665 Utility	y issue fee (or reissue)			
Extra Claims below Fee Paid	1502	480	2502	240 Desig	gn issue fee			
Total Claims	1503		2503	320 Plant	t issue fee	L		
Claims - 3** = X = X Multiple Dependent	1460		1460	130 Petiti	ions to the Commissioner			
	1807	7 50	1807		essing fee under 37 CFR 1.17(q)			
Large Entity Small Entity Fee Fee Fee Fee Fee Description	1806	180	1806		nission of Information Disclosure Stmt			
Code (\$) Code (\$)	802	40	8021	40 Reco	ording each patent assignment per erty (times number of properties)			
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385 Filing	g a submission after final rejection CFR 1.129(a))			
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810		each additional invention to be			
1204 86 2204 43 ** Reissue independent claims over original patent	180	1 770	2801		nined (37 CFR 1.129(b))			
1205 18 2205 9 ** Reissue claims in excess of 20	180		1802	900 Req	puest for Continued Examination (RCE)			
and over original patent	Othe	er fee /er	· necify)	or a	design application	 		
SUBTOTAL (2) (\$)	Other fee (specify) *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)							
	SUBMITTED BY (Complete (if applicable)) Name (Print/Time) Registration No. Tolophore							
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Name (Print/Type)
Registration No. (Attorney/Agent)
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Signature
Date

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